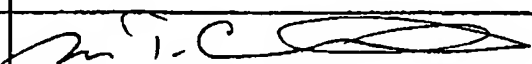
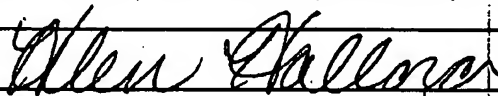


| | | |
|---|----------------------|-------------------|
| TRANSMITTAL FORM (To be used for all correspondence after initial filing) | Application Number | 10/612,713 |
| | Filing Date | July 1, 2003 |
| | First Named Inventor | David A. Tirrell |
| | Art Unit | 1636 |
| | Examiner Name | David Guzo, Ph.D. |
| | Attorney Docket No. | 110197.402C1 |

| ENCLOSURES (check all that apply) | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement and Transmittal <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number _____ of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <u>Letter to David Guzo explaining error in previous terminal disclaimer (copy of previously submitted documents)</u> |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|-----------------|--------|
| Firm Name | Seed Intellectual Property Law Group PLLC | Customer Number | 00500 |
| Signature |  | | |
| Printed Name | William T. Christiansen, Ph.D. | | |
| Date | November 15, 2006 | Reg. No. | 44,614 |

| CERTIFICATE OF TRANSMISSION/MAILING | | |
|---|--|-------------------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | |
| Signature |  | |
| Typed or printed name | Helen Halloran | Date: November 15, 2006 |

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
865366_1.DOC

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2006

Complete if Known

| | |
|----------------------|-------------------|
| Application Number | 10/612,713 |
| Filing Date | July 1, 2003 |
| First Named Inventor | David A. Tirrell |
| Examiner Name | David Guzo, Ph.D. |
| Art Unit | 1636 |
| Attorney Docket No. | 110197.402C1 |

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$65

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or underpayments ☒ Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|--------------|--------------|--------------|--------------|------------------|--------------|----------------|
| | Small Entity | Small Entity | Small Entity | Small Entity | Small Entity | Small Entity | |
| Utility | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | |
| Design | 300 | 150 | 500 | 250 | 200 | 100 | |
| Provisional | 200 | 100 | 100 | 50 | 130 | 65 | |
| | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| | | | | |
|-------------------------|---------------------|-----------------|----------------------|----------------------------------|
| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
| _____ -20 or HP = _____ | X | _____ | _____ | Fee (\$) |
| | | | | Fee Paid (\$) |

HP = highest number of total claims paid for, if greater than 20.

| | | | |
|------------------------|---------------------|-----------------|----------------------|
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
| _____ -3 or HP = _____ | X | _____ | _____ |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|---------------------|---------------------|---|-----------------|----------------------|
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
| _____ -100 = _____ | /50 = _____ | (round up to a whole number) | x | _____ |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimer Fee

65

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SUBMITTED BY

| | | | | | |
|-------------------|---|-----------------------------------|--------|-----------|-------------------|
| Signature |  | Registration No. (Attorney/Agent) | 44,614 | Telephone | 206-622-4900 |
| Name (Print/Type) | William T. Christiansen, Ph.D. | | | Date | November 15, 2006 |

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Seed^{IP}

November 1, 2006

William T. Christiansen, Ph.D.
BillC@SeedIP.com**By Facsimile: (571) 273-8300**David Guzo, Ph.D.
Primary Examiner
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450


COPY

Re: U.S. Patent Application No. 10/612,713, Entitled
OVEREXPRESSION OF AMINOACYL TRNA SYNTHETASES FOR EFFICIENT
PRODUCTION OF ENGINEERED PROTEINS CONTAINING AMINO ACID
ANALOGUES
Seed Docket No.: 110197.402C1

Dear Dr. Guzo:

Please find enclosed a corrected Terminal Disclaimer for U.S. Patent Application No. 10/612,713. We originally filed a Response to Final Rejection along with a Terminal Disclaimer on October 27, 2006. There was a typographical error in the Response and Terminal Disclaimer which listed the prior patent No. as 6,585,207. The correct patent number is 6,586,207. Please find a new Terminal Disclaimer which lists the correct prior patent number.

We request that you honor the language of our transmittal and correct the prior patent number.

Very truly yours,
Seed IP Law Group PLLC
William T. Christiansen, Ph.D.Enclosure:
Corrected Terminal Disclaimer

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address 701 Fifth Avenue
Suite 5400
Seattle, WA 98104
telephone 206.622.4900
facsimile 206.682.6031
website SeedIP.com

Seed^{IP}

November 15, 2006

William T. Christiansen, Ph.D.
Telephone: (206) 622-4900
BillC@SeedIP.com

Facsimile Transmission

To: David Guzo, Ph.D. – Primary Examiner

Fax No.: (571) 273-0767

Phone No.: (571) 272-0767

Re: U.S. Application No. 10/612,713

Your Ref.:

Seed IP Ref.: 110197.402C1

No. of Pages: 6 (including this page)

If you do not receive all pages, please call Helen Halloran at (206) 622-4900 or fax our office.☒ Urgent☐ For Review☐ Please Confirm
Receipt☒ Please Reply
ASAP

Comments:

Documents attached:

Fee Transmittal

Transmittal Form

Letter concerning Terminal Disclaimer correction (originally submitted 11/1/06)

Terminal Disclaimer & Transmittal Form (originally submitted 11/1/06)

Transmission Information:

Date:

11/15/06

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EW.